

Best Available Copy

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM ITO-876)							SERIAL NO. 510375 APPLICANT(S)		FILING DATE 2-22-00				
							CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	INO.	DEP.	INO.	DEP.	INO.	DEP.		INO.	DEP.	INO.	DEP.	INO.	DEP.
1							61						
2							62						
3							63						
4							64						
5							65						
6							66						
6							66						
7							67						
8							68						
9							69						
10							60						
11							61						
12							62						
13							63						
14							64						
15							65						
16							66						
16							66						
17							67						
18							68						
19							69						
20							70						
21							71						
22							72						
23							73						
24							74						
25							75						
26							76						
27							76						
28							77						
29							78						
30							79						
31							80						
32							81						
33							82						
34							83						
35							84						
36							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
46							98						
47							97						
48							98						
49							99						
50							100						
TOTAL	16						TOTAL						
TOTAL	9						TOTAL						
TOTAL	25						TOTAL						